

In re Application of:  
Hancock et al.  
Application No.: 10/661,471  
Filed: September 12, 2003  
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PATENT  
Atty Docket No.: UBC1180-2

**Amendments to the Claims**

Please cancel claims 89-98, 101-105 and 108-116 without prejudice or disclaimer.

The listing of claims will replace all prior versions, and listings of claims in the application.

**Listing of Claims:**

Claims 1-107. (Canceled)

117. (Previously presented) A method of treating inflammation in a subject having or at risk of having inflammation comprising administering to the subject a therapeutically effective amount of a peptide as set forth in SEQ ID NO:7.

118. (Previously presented) The method of claim 117, wherein the peptide contains at least one amino acid that is a D-enantiomer.

119. (Previously presented) The method of claim 117, wherein the peptide is cyclic.

120. (Previously presented) The method of claim 117, wherein the peptide sequence is reversed.

121. (Previously presented) The method of claim 117, wherein the peptide is administered in combination with an antibiotic.

122. (Previously presented) The method of claim 117, wherein the peptide is administered in combination with granulocyte-macrophage colony stimulating factor (GM-CSF).

123. (Previously presented) The method of claim 121, wherein the antibiotic is selected from aminoglycosides, penicillins, cephalosporins, carbacephems, cephamycins, chloramphenicols, glycylicyclines, lincosamides, aminocyclitols, cationic antimicrobial peptides, lipopeptides, polymyxins, streptogramins, oxazolidinones, lincosamides, fluoroquinolones,

carbapenems, tetracyclines, macrolides, beta-lactams carbapenems, monobactams, quinolones, tetracyclines, or glycopeptides.

124. (Previously presented) A method of treating sepsis in a subject having or at risk of having sepsis comprising administering to the subject a therapeutically effective amount of a peptide as set forth in SEQ ID NO:7.

125. (Previously presented) The method of claim 124, wherein the peptide contains at least one amino acid that is a D-enantiomer.

126. (Previously presented) The method of claim 124, wherein the peptide is cyclic.

127. (Previously presented) The method of claim 124, wherein the peptide sequence is reversed.

128. (Previously presented) The method of claim 124, wherein the peptide is administered in combination with an antibiotic.

129. (Previously presented) The method of claim 124, wherein the peptide is administered in combination with granulocyte-macrophage colony stimulating factor (GM-CSF).

130. (Previously presented) The method of claim 128, wherein the antibiotic is selected from aminoglycosides, penicillins, cephalosporins, carbacephems, cephamycins, chloramphenicols, glycyclines, lincosamides, aminocyclitols, cationic antimicrobial peptides, lipopeptides, polymyxins, streptogramins, oxazolidinones, lincosamides, fluoroquinolones, carbapenems, tetracyclines, macrolides, beta-lactams carbapenems, monobactams, quinolones, tetracyclines, or glycopeptides.